PTO/SB/21 (09-04) (AW 10/2004)
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## **TRANSMITTAL FORM**

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Total Number of Pages in This Submission

Application Number	10/798,786	
Filing Date	March 10, 2004	
First Named Inventor	Robert A. Van Tassel	
Art Unit	3739	
Examiner Name	Roy Dean Gibson	
Attorney Docket No.	BSI-557US1	

ENCLOSURES (Check all that apply)								
Fee Transmittal Form Fee Attached	Drawing(s) Licensing-related Papers	After Allowance Communication to TC						
Amendment/Reply After Final Affidavits/Declaration(s)  Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s	Petition  Petition to Convert to a Provisional Application  Power of Attorney, Revocation, Change of Correspondence Address  Terminal Disclaimer  Request for Refund	Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b), 2038, Return Receipt Postcard						
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks:							
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT								
Firm Name RatnerPrestia  Signature School Glenn M. Massina								
Date August 28, 2007	Registration No.	40,081						
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Typed or Printed Name Anne Pinto Date August 28, 2007								

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PTO/SB/17 (12-04v2) (AW 1/2005)

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Effective on 12/08/04.			Complete if Known								
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818).			Application Number 10/79		798,786						
FEE TRANSMITTAL		Filing Date Marc		March	March 10, 2004						
For FY 2007		First Named Inventor Ro		Rober	Robert A. Van Tassel						
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name Roy Dean Gibson								
			Art Unit 3739								
TOTAL AMOUNT OF P	AYMENT	(\$) 2090		Attorney Docket No. BSI-557US1							
METHOD OF PAYMENT (check all that apply)											
☐ Check ☑ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):											
□ Deposit Account	Deposit A	Account Number:	18-035	<u> </u>	eposit A	ccoun	t Name: <u>Rat</u>	nerPrestia			
For the abové-ide	ntified depo	sit account, the D	irector i	is hereby a	uthorized	d to: (d	check all that	apply)			
Charge fee(s) in	ndicated belo	w			harge fee	(s) indi	cated below, e	except for the filin	g fee		
Charge any add under 37 CFR			of fee(s)		redit any o	overpa	yments				
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FEE CALCULATION								······································			
1. BASIC FILING, SEA	RCH, AND	EXAMINATION FEI	ES	***		····· -···					
	FILING	FEES	SEARC	H FEES	EXA	TANIN	ION FEES				
	S	mall Entity	<u>s</u>	mall Entity	_	<u>s</u>	mall Entity				
Application Type	Fee (\$)	Fee (\$) F	ee (\$)	Fee (\$)	<u>Fee</u>	(\$)	Fee (\$)	Fees Paid (\$)			
Utility	300		500	250	20		100				
Design	200		100	50	13		65	<del></del>			
Plant	200		300	150	16	_	80				
Reissue	300	150	500	250	60	0	300				
Provisional	200	100	0	0		0	0				
2. EXCESS CLAIM FE	ES							Small E	ntity		
Fee Description								Fee (\$)	Fee (\$)		
Each claim over 20		•						50	25		
Each independent of	laim over 3 (i	ncluding Reissues)						200	100		
Multiple dependent of		1 2 32	_					360	180		
Total Claims - 20 or HP	<u>Extra Cla</u>	aims Fee (\$) x	<u>Fe</u>	e Paid (\$)	Multiple [ Fee (\$)		ent Claims e Pald (\$)				
HP = highest number of total claim	ns paid for, if grea	ater than 20	_	n Boid (\$)		-					
indep, Claims - 3 or HP =	Extra Cla	x	=	e Paid (\$)							
HP = highest number of independ		or, if greater than 3									
3. APPLICATION SIZE If the specification and	drawings exce										
the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
100 =	-	/50 =		nd up to a wh							
4. OTHER FEE(S)											
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): Extension of Time 1590											
Appeal Brief								<u>500</u>			
SUBMITTED BY Complete (if applicable)											
Signature	MI	Registration	No. Attorn	ney/Agent)	40,081		Telephone	(610) 407-0700			
Name (Print/Type) Glenn I	M. Massina						Date	August 28, 2007			

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